



Rural District of Marlborough  
and Ramsbury

---

# ANNUAL REPORTS

of the

MEDICAL OFFICER  
OF HEALTH

and

CHIEF PUBLIC HEALTH  
INSPECTOR

FOR THE YEAR ENDED 1967



MON Marlborough & Kamsbury I 1967  
E M Wright E203 31 OCT 1969 6961 MON 21



## MEMBERS OF THE GENERAL PURPOSES COMMITTEE

(as at December, 1967)

Chairman: Councillor W. A. Brown, J.P.

Vice-Chairman: Councillor D. Gauntlett

Councillor Miss P. E. Courtman

Councillor Capt. K. A. H. Cummins

Councillor R. N. Day

Councillor The Hon. Mrs.

O. H. Frost, J.P.

Councillor W. G. Grooby

Councillor Capt. R. E. L. Harvey, J.P.

Councillor T. P. J. G. Hayward

Councillor Major R. D. Horton, J.P.

Councillor R. J. Horton

Councillor Lady Jameson

Councillor Mrs. M. E. Knapp

Councillor Major R. H. L. Wiggins

Councillor F. M. Lawton

Councillor D. L. Lemon

Councillor M. S. Pocock

Councillor W. E. T. Lock

Councillor The Rev. R. A. Robbins

Councillor The Rt. Hon.

Lord Romilly

Councillor Mrs. I. Sewell

Councillor W. L. Smith

Councillor R. G. F. Swanton

Councillor F. Swanton, O.B.E.

Councillor D. F. White

---

## PUBLIC HEALTH OFFICERS OF THE AUTHORITY

*Medical Officer of Health:*

F. D. F. Steede, M.B., B.Ch., D.P.H.

*Clerk:*

Miss G. M. Boswell

Council Offices, 1 The Green, Marlborough

(Tel. 2487 and 2118)

*Chief Public Health Inspector:*

K. F. Hudson, M.A.P.H.I., A.R.S.H.

*Additional Public Health Inspector:*

D. G. McIntosh, M.R.San.A.

(Resigned 31st May, 1967)

M. E. Northcombe, M.A.P.H.I.

(Commenced 1st October, 1967)

*Building Inspector:*

C. Richards

*Rodent Officer:*

M. W. Welch

*Clerk:*

Mrs. J. Batty

Public Health Department, R.D.C. Offices, London Road, Marlborough

(Tel. 2394)

---

The Medical Officer of Health acts in a similar capacity for the Borough of Marlborough and the Rural Districts of Amesbury and Pewsey. These combined districts have a population of 69,120 and an area of 235,289 acres. They have appointed a Joint Committee, the East Wiltshire United Districts (Medical Officer of Health) Committee, to deal with all matters relating to the office of Medical Officer of Health. The Medical Officer of Health also performs duties for the Wiltshire County Council under the National Health Service, Education and Mental Health Acts.



## RURAL DISTRICT OF MARLBOROUGH AND RAMSBURY

East Wilts United Districts (M.O.H.) Office,  
1 The Green,  
Marlborough.

Telephone: 2486 and 2118.

To The Chairman and Councillors of the Rural District:

*Mr. Chairman, My Lord, Ladies and Gentlemen,*

I have the honour to present my annual report for the year 1967, which is compiled on similar lines as last year to comply with the requirements of the Ministry of Health. I am grateful to Mr. Hudson, the Chief Public Health Inspector, for his report which is included. I am also indebted to Dr. Lycett, the County Medical Officer, for supplying me with details of immunisation procedures carried out, and to Mr. Hampshire, the Water Engineer, Borough of Swindon, for supplying me with a summary of bacterial and chemical analysis.

The district, with Marlborough Borough at its centre, extends for a distance of approximately fifteen miles east to west and ten miles north to south, and much of it is situated on downland. The district is a very pleasant one, with an attraction for visitors, containing as it does the Savernake Forest and part of the River Kennet Valley for a great deal of its extent. It also has important archaeological remains, the best known of which is probably the stone circle at Avebury. There is little in the way of industry, since the district is predominantly a farming area of considerable importance, and what little there is is mainly concerned with agriculture. A certain number of inhabitants, however, find their livelihood in industrial concerns in the nearby Borough of Swindon to the north-east. The district is important from the communication point of view, and is traversed by several main routes including for all its width the London to Bristol A4 road. The foreshadowed M4 extension, too, will pass through a part of the area.

The health of the district remains good. A study of the vital statistics show that there has been a decrease in the number of deaths by twenty, while the number of births is almost unchanged at 157. The natural increase, excess of births over deaths, is 58 compared with the Registrar-General's estimate of 110. Infant mortality again is low, and gives a figure well below that of the national average. The fall in the number of deaths is mainly due to a decrease in those from malignant disease and coronary heart disease. I feel, however, this is not a trend which is likely to be maintained in either of these diseases. Deaths from cancer of the lung were reduced, but again I make no apology for emphasising the hazard associated with cigarette smoking. This habit is responsible for at least 85 per cent of all cases of lung cancer, and evidence continues to accumulate that it is a factor of great importance in coronary heart disease and chronic bronchitis. Deaths from lung cancer now approach 30,000 per annum, nearly a third of all deaths from malignant diseases. Most of those affected are, of course, men, but

women are beginning to catch up fast, and many of those dying are in the age group 50–55 years. As far as deaths from coronary heart disease are concerned, in all the reported series there is an increased rate associated with cigarette smoking, mainly in the younger smoker. In a very recent series the rate was three times that of the non-smoker, and even higher in those in the group of smokers who keep the cigarette permanently in their lips. While cigarette smoking is stressed as the main environmental causative factor in lung cancer, it is now being increasingly realised that asbestos dust can be responsible for a highly malignant tumour of the lung “linings.” Although the numbers of cases from this cause are relatively small, and none have been implicated as a cause of death in this district, but because in certain instances exposure to asbestos dust seems to have been relatively trivial, I feel there should be greater awareness outside the factory of this hazard. Those at risk in the area are likely to be mainly in the building trade, not forgetting the “do-it-yourself” expert.”

The Mass Radiography Unit paid a visit to the parish of Aldbourne in May, for what must be the last “open” session to take place in the district, when 483 persons were examined, of whom only six needed further investigation. Although for the first time for some years one death was recorded in the district as due to pulmonary tuberculosis, the number of new cases discovered by the Mass Radiography Unit are now so few that it has, I understand, been decided to discontinue these “open” sessions, and instead, all future cases are to be referred to the Unit by a doctor. Inevitably this will mean that the diagnosis of lung cancer, while in an operable condition, in future will become rare, but this it seems must be accepted in view of the financial implications.

The number of cases of infectious disease, apart from measles, was small. I am glad to know that a vaccination campaign designed to eliminate measles is now under way, for this disease, seldom serious, is a considerable nuisance, and a source of unnecessary strain on the family doctor service during an epidemic. Nine cases of salmonella infection were ascertained during the year, none so far as is known due to any specific food. In the case of one family outbreak due to *Salmonella dublin*, the source of infection was in cattle, and came to notice as a result of voluntary notification by the farmer's wife. This could have lead to difficulties if I had not received this information, since a child in the family was due to be re-admitted to hospital. I feel that salmonella infections of animals should be statutorily notifiable to the medical officer of health, by the veterinary surgeon concerned. Until this is done notifications are unlikely to be received universally, which is understandable, since some veterinary surgeons may be unwilling to divulge information which could result in inconvenience to their client and his family. There was one classic outbreak of food poisoning due almost entirely to *clostridium welchi* infection, in a school where 31 children and staff out of over 100 at risk, became ill. The diagnostic picture was slightly confused in that a small number of cases of dysentery were identified fortuitously. These were dealt with by normal preventive measures, which in my view were very successful in limiting the number of secondary cases. In addition, during the year, a number of cases of gastroenteritis were in-



vestigated, where bacteriological reports were negative. Prevention of this type of illness is almost entirely a matter of attention to good habits with regard to personal hygiene. One knows that these habits are taught and encouraged in schools, but so often one finds inadequate washing facilities in public places, and it is not surprising that these good habits tend to be lost early. Recent instances of causative organisms of intestinal disease having become resistant to antibiotics have made prevention even more important. There ought always to be adequate hand washing facilities in association with the toilet, and I feel that it is becoming not unreasonable to suggest that in new houses no kitchen should be constructed without a wash-hand basin as well as a sink.

One proven case of anthrax was notified in a farm animal, the first for many years in the district.

Vaccination figures for diphtheria, tetanus and whooping cough have shown a very slight falling off on last year's figures, but this did not cause any anxiety, since I know that every effort is made by the County Health Department to ensure that all children are followed up, and there are few who fail to attend either their own doctor or a County Welfare Clinic to receive this most important protection. Immunisation figures against poliomyelitis with the oral vaccine are excellent.

Generally speaking housing conditions are reasonably satisfactory, but little improvement has been made on the length of the waiting list. There is no doubt that a number of council houses are under-occupied at the present time, and it seems sensible to concentrate the limited new building permitted on smaller accommodation, mainly for the elderly, since this can also be used to make some under-occupied housing available for younger growing families. So far the Council have not felt the need to provide for any grouped accommodation schemes with warden facilities for the elderly. I myself feel there is room for such accommodation, although this is difficult to demonstrate since those in need cannot usually wait for long to be counted on a list of applicants. Marlborough Borough have recently completed an excellent scheme with full community services, and perhaps the Rural District could co-operate with the Borough in a joint scheme when the financial climate improves.

During the year two small clearance areas were confirmed. In the main, future slum clearance will be limited to individual houses only, as circumstances arise. These are likely to come mainly from those houses which cannot be brought up to a satisfactory standard by the improvement grant procedure, a procedure which the Council are to be congratulated on having done a great deal to publicise.

I would again like to express my thanks to all those voluntary workers who have given up so much of their time to undertake the meals on wheels service. Unfortunately, distribution of meals in Froxfield had to cease because of the difficulties in cooking. This is unfortunate for I would like to see as much as possible of the district covered by a service which enables old people to carry on and lead an independent life, without which it would often be impossible. Apart from the meal, and there is no doubt that many old



people suffer from malnutrition in some degree, the regular visit is of great value and frequently leads to the discovery of other important needs which can often be met.

The water supply is adequate and satisfactory. Mr. Hudson has also made a reference in his report to water supplies, and his Department with my approval take regular samples which have almost always been satisfactory.

In recent years the Council have made great headway in providing main drainage in the more densely populated areas in the district. There are, however, still some areas which lack this amenity, and it is unfortunate that this provision is being delayed for financial reasons beyond the Council's control.

Another year has gone by without any indication that the Local Health Authority are to introduce fluoridation of public water supplies in the district in the near future. This well-proven health measure will bring considerable advantage to the dental health of the rising generation, reducing dental decay by at least 50 per cent. It is safe, cheap, and is endorsed by every reputable body of medical and dental opinion. Many of us who talk to young mothers in schools and clinics know that there is a large amount of support for this measure from parents, in the interest of their children's health.

In concluding this report I should like to thank the Council and members of the General Purposes Committee for the very great deal of support which they have given me during the year. I am also grateful to the officers of the Council for their helpfulness and consideration, and particularly to Mr. Hudson and his staff for the very hard work which they put in during the year. I should also like to thank Dr. Lishman who acts as my deputy, for his ready help and advice. I am very grateful to Dr. Wormald and his staff at the Public Health Laboratory, Odstock, for their continued co-operation often at very short notice. Finally, I should like to thank my clerical assistant, Miss Boswell, not only for the conscientious way she has carried out her work during the year, but also for her valued assistance with this report.

I have the honour to be,

*Your obedient servant,*

F. D. F. STEEDE,

*Medical Officer of Health.*

# STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area in acres ... ..	94,510
Number of Parishes ... ..	25
Population, Registrar-General's mid-year estimate ...	10,480
Number of inhabited houses, flats and bungalows ...	3,600
Rateable value as at 1st April, 1967 ... ..	£240,208
Product of a Penny Rate (estimated) ... ..	£913

VITAL STATISTICS					M.	F.	Total
LIVE BIRTHS—Legitimate	...	...	...	...	67	78	145
Illegitimate	...	...	...	...	6	6	12
				Totals	73	84	157
Live birth rate per 1,000 population	...	...	...	...			15.0
Illegitimate live births per cent of total live births	...	...	...	...			8.0
Stillbirths—Legitimate	...	...	...	...	2	2	4
Illegitimate	...	...	...	...	—	—	—
				Totals	2	2	4
Stillbirth rate per 1,000 total live and stillbirths	...	...	...	...			25.0
Total live and stillbirths	...	...	...	...	75	86	161
DEATHS	...	...	...	...	54	45	99
Death rate per 1,000 population	...	...	...	...			9.4
Infant deaths under one year—Legitimate	...	...	...	...	1	1	2
Illegitimate	...	...	...	...	—	—	—
				Totals	1	1	2
Infant mortality rate per 1,000 live births	...	...	...	...			13.0
Legitimate infant deaths per 1,000 legitimate live births	...	...	...	...			14.0
Illegitimate infant deaths per 1,000 illegitimate live births	...	...	...	...			nil
Neonatal deaths (under four weeks)—Legitimate	...	...	...	...	1	1	2
Illegitimate	...	...	...	...	—	—	—
				Totals	1	1	2
Neonatal mortality rate per 1,000 total live births	...	...	...	...			13.0
Early neonatal deaths (under one week)—Legitimate	...	...	...	...	—	1	1
Illegitimate	...	...	...	...	—	—	—
				Totals	—	1	1
Early neonatal mortality rate per 1,000 live births	...	...	...	...			6.4
Perinatal mortality rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)	...	...	...	...		...	31.0
Maternal mortality (including abortion)	...	...	...	...			nil

Year					
	1963	1964	1965	1966	1967
Infant deaths ...	6	9	4	2	2
Infant mortality rate ...	29.3	49.0	21.9	12.5	13.0

## CAUSES OF DEATH, 1967

<i>Causes of Death</i>					<i>Male</i>	<i>Female</i>	<i>Total</i>
1	Tuberculosis, respiratory	...	...	...	1	—	1
2	Tuberculosis, other	...	...	...	—	—	—
3	Syphilitic disease	...	...	...	—	—	—
4	Diphtheria	...	...	...	—	—	—
5	Whooping cough	...	...	...	—	—	—
6	Meningococcal infections	...	...	...	—	—	—
7	Acute poliomyelitis	...	...	...	—	—	—
8	Measles	...	...	...	—	—	—
9	Other infective and parasitic diseases	...	...	...	—	—	—
10	Malignant neoplasms, stomach	...	...	...	—	5	5
11	„ „ lung, bronchus	...	...	...	4	1	5
12	„ „ breast	...	...	...	—	1	1
13	„ „ uterus	...	...	...	—	2	2
14	Other malignant and lymphatic neoplasms	...	...	...	3	7	10
15	Leukaemia, aleukaemia	...	...	...	—	—	—
16	Diabetes	...	...	...	—	3	3
17	Vascular lesions of nervous system	...	...	...	10	6	16
18	Coronary disease, angina	...	...	...	8	3	11
19	Hypertension with heart disease	...	...	...	1	1	2
20	Other heart disease	...	...	...	8	6	14
21	Other circulatory diseases	...	...	...	4	2	6
22	Influenza	...	...	...	—	—	—
23	Pneumonia	...	...	...	2	3	5
24	Bronchitis	...	...	...	7	1	8
25	Other diseases of respiratory system	...	...	...	1	—	1
26	Ulcer of stomach and duodenum	...	...	...	—	—	—
27	Gastritis, enteritis and diarrhoea	...	...	...	—	—	—
28	Nephritis and nephrosis	...	...	...	—	—	—
29	Hyperplasia of prostate	...	...	...	—	—	—
30	Pregnancy, childbirth, abortion	...	...	...	—	—	—
31	Congenital malformations	...	...	...	—	1	1
32	Other defined and ill-defined diseases	...	...	...	2	—	2
33	Motor vehicle accidents	...	...	...	1	1	2
34	All other accidents	...	...	...	2	1	3
35	Suicide	...	...	...	—	1	1
36	Homicide and operations of war	...	...	...	—	—	—
All Causes					54	45	99

### Comparison with England and Wales

	<i>per 1,000 population</i>		<i>per 1,000 Live Births</i>	<i>per 1,000 Total Births</i>
	<i>Live Births (Adjusted)</i>	<i>Death Rate (Adjusted)</i>	<i>Infant Mortality</i>	<i>Stillbirths</i>
Marlborough and Ramsbury R.D.	16.5	9.2	13.0	25.0
England and Wales	17.2	11.2	18.3	14.8



# GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

(as at December, 1967)

## General Practitioners:

Dr. H. J. Fenn, M.R.C.S., L.R.C.P., 9 Forest Hill, Great Bedwyn.  
Tel.: Great Bedwyn 388.

Dr. W. T. Mills, M.R.C.S., L.R.C.P.	}	Kennet House, Ramsbury. Tel.: Ramsbury 366/7.
Dr. T. J. Tiplady, M.B., B.S., M.R.C.S., L.R.C.P., D.Obst., R.C.O.G.		
Dr. C. G. James, B.M., B.Ch.		

Dr. J. B. Maurice, M.R.C.S., L.R.C.P.	}	The Surgery, 41 High Street, Marlborough. Tel.: Marlborough 2187.
Dr. T. K. Maurice, M.B., B.Chir., M.R.C.S., L.R.C.P.		
Dr. T. R. Maurice, M.A., M.B., B.Chir., M.R.C.S., L.R.C.P.		
Dr. R. O. Wheeler, M.B., B.S., F.R.C.S., M.R.C.S., L.R.C.P.		

## Hospitals:

Savernake Hospital. Tel. Marlborough 2101.

Children's Convalescent Hospital, Marlborough. Tel. Marlborough 2271.

The Princess Margaret Hospital, Swindon. Tel.: Swindon 6231.

Stratton St. Margaret's Hospital. Tel.: Stratton St. Margaret 3331.

## Public Health Service:

Odstock Hospital, Salisbury (Dr. P. Wormald, M.A., M.D.). Tel. Salisbury 6020.

## County Council Health Department Services:

### (a) Ambulance Facilities

This service is based in Swindon—dial 999.

### (b) Chiropody

This is mainly a domiciliary service.

### (c) Clinics

Cervical Cytology Clinic, Health Centre, Kingsbury Street, Marlborough. Tel. Marlborough 2832.	First and Third Tuesday of each month, 2.15–4.15 p.m.
--	--

Infant Welfare Clinic, Health Centre, Kingsbury Street, Marlborough. Tel. Marlborough 2832.	Third Wednesday of each month, 2–4.30 p.m.
---	---

(d) **District Nurse/Midwives**

Miss M. McLeod-Craik,  
11 Brook Street,  
Great Bedwyn.  
Tel. Great Bedwyn 263.

Mrs. A. Gigg,  
The Chestnuts,  
Wootton Bassett Road,  
Swindon.  
Tel. Swindon 22115.

Mrs. E. Nevin,  
18 Whittonditch Road,  
Ramsbury.  
Tel. Ramsbury 289.

Mrs. J. Nightingale,  
4 Barrow Close,  
Elcot Lane, Marlborough.  
Tel. Marlborough 2547.

Buttermere, Froxfield, Great Bedwyn,  
Little Bedwyn, Shalbourne, Tidcombe  
and Fosbury, Grafton, Wilton, Ham.

Winterbourne Bassett, Winterbourne  
Monkton, Berwick Bassett, Broad  
Hinton, Avebury.

Aldbourn, Baydon, Chilton Foliat,  
Ramsbury.

Mildenhall, Ogbourne St. Andrew, Og-  
bourne St. George, Preshute, Saver-  
nake, West Kennet, East Kennet,  
Fyfield, West Overton, Lockeridge,  
Beckhampton.

(e) **Health Visitors**

Miss B. Poulter,  
Pear Tree Cottage, Great Bedwyn.  
Tel.: Great Bedwyn 283.

Miss E. R. Chesney,  
The Barn, Easton Royal.  
Tel.: Burbage 248.

Mrs. S. D. Biggs,  
16 Somerville Road, Walcot, Swindon.  
Tel.: Swindon 21550.

Miss J. Bown,  
Corner Cottage, Manningford Bruce.  
Tel.: Pewsey 2221.

(f) **Mental Welfare Officers**

The Seymour Clinic,  
Cricklade Road, Swindon.  
Tel. Swindon 5193.

66 New Park Street,  
Devizes.  
Tel. Devizes 3629.

Broad Hinton, Ogbourne St. Andrew,  
Ogbourne St. George, Aldbourn,  
Baydon.

All the area except the parishes above.

**County Council Welfare Department:**

Area Welfare Officer: Mr. A. P. Tucker, A.I.S.W., 66 New Park Street,  
Devizes. Tel.: Devizes 3628.

**County Council Children's Department:**

The Area Children's Officer, 29 Milton Road, Swindon. Tel.:  
Swindon 4998.

# IMMUNISATION STATISTICS, 1967

## Diphtheria, Whooping Cough and Tetanus Immunisation

<i>Year of Birth</i>		1967	1966	1965	1964	1963	1962-58	1952-57	Others under 16
Primary immunisations completed during 1967	Diph.	65	69	4	—	2	4	2	—
	Wh/c.	65	69	1	—	—	1	—	—
	Tet.	65	69	4	—	2	10	23	9
Reinforcing injections administered during 1967	Diph.	1	38	87	15	15	140	9	—
	Wh/c.	1	16	36	6	1	30	3	—
	Tet.	1	38	87	15	16	149	68	15

## Smallpox Vaccination

	<i>Months</i>				<i>Years</i>		
Age Group	0-3	3-6	6-9	9-12	1	2-4	5-15
Vaccinations	—	—	—	4	66	19	3
Re-vaccinations	—	—	—	—	—	5	28

## Poliomyelitis Immunisation

<i>Age Group</i>	3rd Quad.	2nd inj.	3rd inj. or 4th Quad.	4th inj.	3 oral doses	2 orals after 2 inj.	4th oral after 3 inj. or 3 oral
1967 ... ..	—	—	—	—	63	—	—
1966 ... ..	—	—	—	—	76	—	34
1965 ... ..	—	—	—	—	9	—	19
1964 ... ..	—	—	—	—	3	—	6
1963 ... ..	—	—	—	—	4	—	12
1958-62 ... ..	—	—	—	—	31	—	170
1952-57 ... ..	—	—	—	—	4	—	11
Others under 16 ...	—	—	—	—	1	—	—
Others over 16 ...	—	—	—	—	3	—	7
Totals ... ..	—	—	—	—	194	—	259



# WATER SUPPLY

(A report by Mr. Hampshire, B.Sc., A.M.I.C.E., M.I.W.E., Water Engineer, Borough of Swindon)

## BACTERIOLOGICAL ANALYSIS, 1967

Source	Water	Total No. of Samples	Samples in which Coliforms were absent in 100 ml. % No.	Samples in which Bact. Coli Type I were absent in 100 ml. % No.	Remarks
Clatford	Raw	50	48	50	100
	Final	51	51	51	100
Great Bedwyn	Raw	50	47	50	100
	Final	50	50	50	100
Ramsbury	Raw	48	47	48	100
	Final	49	49	49	100
Ogbourne	Raw	95	67	94	99
	Final	95	95	95	100

11

## CHEMICAL ANALYSIS OF FINAL WATER RESULTS IN PARTS PER MILLION (ppm)

Source	Date of Sample	Chlorides	Non- Carbonate Hardness	Total Hardness	Nitrate Nitrogen	Nitrite Nitrogen	Ammoniacel Nitrogen	Albuminoid Nitrogen	Oxygen Absorbed
Clatford	6 July 67	7	20	240	4.0	absent	0.03	0.00	0.00
Great Bedwyn	6 July 67	12	40	300	6.3	absent	0.03	0.00	0.10
Ramsbury	6 July 67	9	15	215	2.7	absent	0.00	0.00	0.00
Ogbourne	6 July 67	14	50	350	5.7	absent	0.00	0.00	0.00

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1967

Disease	Total cases all ages	Admitted to Hospital	Total Deaths	Analysis of total cases in age groups										
				Under 1 year	1-	2-	3-	4-	5-9	10-14	15-24	25-34	35-44	45-64
														65+
Age unknown														
Anthrax ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ... ..	32	—	—	—	1	1	1	2	13	5	3	4	2	—
Acute encephalitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food poisoning ... ..	32	—	—	—	—	—	—	—	10	16	—	4	2	—
Measles ... ..	206	—	—	4	19	16	15	19	109	22	—	2	—	—
Meningococcal infections ... ..	1	1	—	1	—	—	—	—	—	—	—	—	—	—
Ophthalmia neonatorum ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid fevers ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ... ..	2	—	5	—	—	—	—	—	—	—	—	—	—	2
Acute poliomyelitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia ... ..	2	2	—	—	—	—	—	—	—	—	2	—	—	—
Scarlet fever ... ..	2	—	—	—	—	—	—	—	2	—	—	—	—	—
Smallpox ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis, respiratory ... ..	3	1	1	—	—	—	—	—	—	—	—	1	1	—
Tuberculosis, other ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping cough ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ... ..	280	4	6	5	20	17	16	21	134	43	5	11	5	2
														1

# MARLBOROUGH AND RAMSBURY RURAL DISTRICT COUNCIL

## Annual Report of the Chief Public Health Inspector

To: The Chairman and Members of the Council.

*Mr. Chairman, My Lord, Ladies and Gentlemen,*

I have pleasure in presenting the nineteenth Annual Report on the activities of the Public Health Department during 1967.

Mr. McIntosh left in May, 1967, to take up an appointment in Bermuda and I wish him every success. Mr. Northcombe, from Newbury, was appointed as his successor in September.

I have received ready assistance from my staff to whom I owe, as always, my sincere thanks.

I should also like to record my appreciation for the help received from Dr. Steede, Mr. Hunt and all other members of the Council staff.

*I am, Mr. Chairman, My Lord, Ladies and Gentlemen,*

*Your obedient servant,*

KENNETH F. HUDSON,

*Chief Public Health Inspector.*



## **HOUSING**

### **General**

Fifty-four new dwellings were completed during the year, fourteen Council owned properties and the remaining forty being for private occupation. These new dwellings were not concentrated in any particular village but were distributed throughout the district with greater numbers being constructed in the more densely populated parishes as one would expect.

There are at this time some two hundred and nine applicants on the waiting list for the tenancy of Council houses. Although this figure does not vary much over the years the percentage living in poor conditions or with relations has consistently been reduced.

### **Slum Clearance**

Early in the year confirmation of two clearance areas in Ramsbury was received from the Ministry.

One demolition order was made and one property was demolished as a result of such an order.

### **Housing Improvement Grants**

Throughout the year the policy of the Council encouraging the public to improve its property with the aid of Improvement Grants was maintained, despite financial restrictions, in the general belief that the repair and improvement of existing housing stock must show a saving over the erection of new property by public expenditure. As a result twenty properties were improved with the aid of Standard Grants and eleven with Discretionary Grants.

### **Housing Survey**

The survey was in abeyance for the greater part of the year due to lack of staff, but has now been re-commenced and the second parish is nearing completion. Meanwhile, properties included in the first survey have continued to be improved and the majority are now in good order.

## **WATER SUPPLY**

As last year there has been no change in the water supplies to the area, Swindon Corporation being the water undertaking.

The six schemes, as described, provide adequate supplies of wholesome water to the majority of houses in the area.

### **Avebury Supply**

The scheme supplies water to the parishes of Preshute, Fyfield, West Overton, East Kennet, Avebury, Winterbourne Monkton, Berwick Bassett, Winterbourne Bassett and Broad Hinton. The pumping station is situated at Clatford and pumps the water from the lower chalk 150 feet deep to a reservoir on Totterdown. There is also a balancing tank erected at Broad Hinton. The water is chlorinated at the pumping station.

### **Baydon Supply**

This supplies the parish of Baydon and the water is obtained from Berkshire. The water is chlorinated at the pumping station and pumped to a tower at Baydon. Practically the whole parish is connected to the supply.

### **Bedwyn Supply**

This scheme supplies water to the villages of Chisbury, Great Bedwyn, Ham, Shalbourne, Wilton and Grafton. It also supplies a farm and several cottages at St. Katherine's in the Pewsey Rural District.

The water is pumped from boreholes at Little Bedwyn to two reservoirs, one at Chisbury and the other at Shalbourne. The water is taken from the lower chalk and is chlorinated at the pumping station.

### **Ogbourne Supply**

The water for this supply is obtained at Whitefield, Ogbourne St. George. The water is boosted to a reservoir on the downs and gravitates to the two parishes of Ogbourne St. Andrew and Ogbourne St. George and to the Military Camp. The majority of the properties in both parishes are connected to the mains. The water is chlorinated at Whitefield.

### **Ramsbury Supply**

This scheme supplies water to the parishes of Aldbourne, Chilton Foliat, Froxfield, Mildenhall and Ramsbury. The water is pumped from the green-sand at Ramsbury to a reservoir north of the village and is chlorinated at the pumping station.

### **Savernake Supply**

This water is obtained in bulk from the Borough of Marlborough supply. The main runs from the top of Postern Hill through the front of Savernake Forest to Iron Gates and supplies Savernake Hospital, two farms and several cottages. The water is chlorinated at the pumping station.

### **Water Samples**

Samples were taken throughout the year from each supply as a precautionary check on the wholesomeness of each supply under all conditions.

As anticipated all samples were satisfactory on bacteriological analysis with the exception of one sample from the Great Bedwyn supply which was described as having "a very small degree of pollution with non-faecal type coliform organisms." Subsequent samples from this supply all proved satisfactory.

Satisfactory chemical analyses were returned in respect of each supply.

# Sampling Report

<i>Supply</i>				<i>No. of Samples Taken</i>	<i>No. of Samples Satisfactory</i>	<i>No. of Samples Slightly Unsatis- factory</i>	<i>No. of Samples Not Satisfactory</i>
Avebury	...	...	...	8	8	—	—
Baydon	...	...	...	9	9	—	—
Bedwyn	...	...	...	9	8	1	—
Ogbourne	...	...	...	9	9	—	—
Ramsbury	...	...	...	7	7	—	—
Savernake	...	...	...	9	9	—	—
Totals				51	50	1	—

The following table gives the numbers of dwelling-houses and population supplied from the public water mains. There are no standpipes in the district.

<i>Parishes</i>				<i>Direct to Houses</i>	
				<i>Houses</i>	<i>Population</i>
Aldbourne	...	...	...	428	1,284
Avebury	...	...	...	132	396
Baydon	...	...	...	115	345
Berwick Bassett	...	...	...	14	42
Broad Hinton	...	...	...	72	216
Chilton Foliat	...	...	...	87	261
East Kennett	...	...	...	14	42
Froxfield	...	...	...	90	270
Fyfield	...	...	...	27	81
Grafton	...	...	...	101	303
Great Bedwyn	...	...	...	275	825
Ham	...	...	...	23	69
Little Bedwyn	...	...	...	36	108
Mildenhall	...	...	...	94	282
Ogbourne St. Andrew	...	...	...	70	210
Ogbourne St. George	...	...	...	96	288
Preshute	...	...	...	8	24
Ramsbury	...	...	...	420	1,260
Savernake	...	...	...	5	15
Shalbourne	...	...	...	125	375
West Overton	...	...	...	131	293
Winterbourne Bassett	...	...	...	38	114
Winterbourne Monkton	...	...	...	40	120
Totals				2,441	7,323

In addition to the six public supplies there are a number of private piped supplies which are also satisfactory.



## DRAINAGE AND SEWERAGE

The villages of Aldbourne, Baydon, Chilton Foliat, Froxfield, Grafton, Great Bedwyn, Ramsbury, Shalbourne and Wilton are served by main sewers.

During the year the sewerage scheme for Broad Hinton was completed. A number of properties have been already connected, including all the Council houses.

Detailed plans of the Phase II sewerage to the Kennet Valley have been prepared and the Council is now waiting for the Ministry's permission to go to tender.

Further consideration is being given to sewerage to the villages of Mildenhall, Ogbourne St. Andrew and Ogbourne St. George. In the case of Mildenhall, it has been agreed to join with the Borough of Marlborough for the treatment works.

## REFUSE COLLECTION AND SALVAGE

Household refuse and salvage are collected weekly from all parishes with the exception of a few isolated premises. The refuse is taken to two refuse tips, one at Knowle, Froxfield, and one at Stockclose, Aldbourne. Ashes from the refuse, together with hardcore, purchased when available, are used as cover for the refuse.

The length of haul in a rural district is considerable. Two vehicles are employed full time for collection, representing a total load capacity of 68 cubic yards between them, and manned by a team of one driver and two loaders. A third smaller vehicle, a Karrier, is used for extra collections on Saturday mornings and at Bank Holiday times.

The other two refuse men spend their time normally covering refuse at the tips and baling salvage, but also have to be brought into use as collectors after Bank Holidays and during the men's holiday periods.

Unfortunately salvage sold last year was down on the previous year due solely to a saturation of the market. The following table shows the figures for 1967 compared with 1966.

	1966						1967					
	Weight			Value			Weight			Value		
	T.	C.	Q.	£	s.	d.	T.	C.	Q.	£	s.	d.
Paper	101	2	0	712	14	10	91	1	2	610	8	7
Rags	1	14	3	7	7	6	2	7	0	23	9	4
Scrap Iron	25	16	3	32	7	0	31	18	3	39	3	6
Totals	128	13	2	£752	9	4	125	7	1	£673	1	5

## FOOD

### Food Premises

The numbers and types of food premises within the area at the end of the year are as follows:

Bakehouses	...	...	5
Butchers	...	...	6
Cafes	...	...	5
Caterers (licensed)	...	...	7
Confectioners	...	...	6
Fishmongers	...	...	1
Greengrocers	...	...	1
Grocers	...	...	39
Public Houses	...	...	24
Others	...	...	4
			<hr/>
			98
			<hr/>

One cafe was closed during the year as was a fish and chip shop. The latter will possibly re-open if a suitable tenant can be found and is in fact a well equipped premises.

Routine inspections continued during the year when the majority of premises were found to be satisfactory.

### Food Hygiene (General) Regulations, 1960

(1) Number of premises	...	...	...	...	98
(2) Number of premises fitted to comply with Regulation 16	...				87
(3) Number of premises to which Regulation 19 applies	...				94
(4) Number of premises fitted to comply with Regulation 19	...				94

Eleven premises do not have separate wash-hand basin facilities in the shop premises, but these are, in most cases, small shops adjoining domestic premises in which such facilities are provided and are available for the use of the staff.

### Registered Premises

Number of premises registered under Section 16 of the Food and Drugs Act, 1955, for the sale of ice-cream	...	...	...	38
---	-----	-----	-----	----

Number of premises registered under Section 16 of the Food and Drugs Act, 1955, for the manufacture of preserved foods	...			5
--	-----	--	--	---

### Poultry Inspection

There is one poultry processing plant within the area which processes turkeys with some hens and ducks. Regular visits were made throughout the year. Birds processed were as follows:

Turkeys	...	...	91,557
Hens	...	...	15,732
Ducks	...	...	40
			<hr/>
	Total		107,329
			<hr/>

Of these tables some 0.2 per cent were rejected as unfit for human consumption and the weight of poultry condemned was as follows:

Turkeys	...	...	1,650 lb.
Hens	...	...	300 lb.
Total			1,950 lb.

### MILK

There are now only nine dealers selling milk by retail in the Rural District area.

This decrease is due to the take-over of a number of smaller dealers by larger competitors.

### Sampling

The samples taken during the year were as follows:

	Standard Test		BIOLOGICAL			
			Tubercle bacillus		Brucella abortus	
	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory
Untreated	15	2	—	—	—	—
Pasteurised	72	—	—	—	—	—
Totals	87	2	—	—	—	—

The two unsatisfactory samples were satisfactory on re-sampling and biological tests were not necessary.

### DAMAGE BY PESTS ACT

As in previous years regular inspections of the farms and business premises have continued throughout the area and individual properties have been treated as necessary.

The use of Warfarin was maintained on all treatments.

	Local Authorities	Private Properties	Farms	Business Properties	Total
No. of inspections made	65	699	224	170	1,158
No. of properties inspected ... ..	17	592	216	157	982
No. of properties infested with rats ...	23	149	36	19	227
No. of properties infested with mice ...	—	9	—	5	14
No. of treatments ...	23	158	36	24	241

Total number of visits made under Damage by Pests Act, 1949—2,229.



## OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Generally the premises in the area within the scope of this Act are now in compliance with its requirements.

Routine visits are made to these premises and any lowering of standards is rectified by informal action.

One hundred and five inspections were made during the year and the registered premises are defined as follows:

The number of premises registered are as follows:

				<i>Employees</i>		<i>Total</i>	
				<i>Male</i>	<i>Female</i>		
				<i>Number</i>			
Offices	...	...	...	24	36	43	79
Retail Shops	...	...	...	30	33	26	59
Wholesale Shops	...	...	...	—	—	—	—
Catering Establishments	...	...	...	7	17	24	41
Fuel Storage Depots	...	...	...	2	9	—	9
				—	—	—	—
Totals				63	95	93	188
				—	—	—	—

## FACTORIES ACT, 1961

There are thirty-one factories registered within the district of various types. Twenty-eight are categorised as power and three as non-power.

The Local Authority is responsible for the administration of the Act in the non-power factories and for the section relating to the sanitary accommodation in the factories with power.

Thirty-one inspections were made during the year where only minor contraventions were found. No difficulties were experienced in securing compliance with the Act.

## SUMMARY OF INSPECTIONS MADE DURING THE YEAR 1967

Bakehouses	...	...	...	8
Building Regulations:				
Commencements	...		120	
Foundations	...	...	50	
Damp-proof course	...		65	
Drains	...	...	225	
Work in progress	...		590	
Completion	...	...	129	
Unclassified	...	...	25	
			<hr/>	
			1,204	
			<hr/>	
Butchers' Shops	...	...	...	8
Cafes, etc.	...	...	...	11
Council House Enquiries	...		...	45
Factories	...	...	...	31
Food Premises	...	...	...	127
Housing	...	...	...	547
Housing Improvement Grants	...		...	74
Infectious Disease	...	...	...	160
Milk Samples	...	...	...	51
Milk and Dairies	...	...	...	26
Nuisances	...	...	...	20
Offices, Shops and Railway Premises	...		...	105
Petroleum	...	...	...	26
Pest Control	...	...	...	2,229
Refuse Collection	...	...	...	184
Tents, Vans and Sheds	...		...	17
Town Planning	...	...	...	189
Water Supply	...	...	...	7
Water Samples	...	...	...	38
Unclassified	...	...	...	19
			<hr/>	
			Totals	<hr/> 3,922 <hr/>

# **FACTORIES ACT, 1961**

## **ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1966 FOR THE RURAL DISTRICT OF MARLBOROUGH AND RAMSBURY IN THE COUNTY OF WILTSHIRE**

### **Prescribed Particulars on the Administration of the Factories Act, 1961**

#### **PART I OF THE ACT**

**1—Inspections** for purposes of provisions as to health (including inspections made by Public Health Inspectors).

<i>Premises</i> (1)	<i>Number on Register</i> (2)	<i>Number of</i>		
		<i>Inspections</i> (3)	<i>Written Notices</i> (4)	<i>Occupiers prosecuted</i> (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	3	3	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	28	28	—	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total ...	31	31	—	—



2—Cases in which *Defects* were found:

Particulars  (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found  (2)	Remedied  (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	2	2	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ...	—	—	—	—	—
(b) Unsuitable or defective ...	1	1	—	—	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not includ- ing offences relating to Outwork) ...	—	—	—	—	—
Total ...	3	3	—	—	—

PART VIII OF THE ACT

(Sections 133 and 134)

NIL RETURN







